

Form **8879-PE****E-file Authorization for Form 1065**  
(For return of partnership income or administrative adjustment request)

OMB No. 1545-0123

Department of the Treasury  
Internal Revenue Service**ERO must obtain and retain completed Form 8879-PE.**  
**Go to [www.irs.gov/Form8879PE](https://www.irs.gov/Form8879PE) for the latest information.****2024**

For calendar year 2024, or tax year beginning

, 2024, and ending

Name of partnership

FRONT KINGS LLC  
FRONT STREET TAVERN

Employer identification number

92-3271390

**Part I Form 1065 Information** (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c).....	1	1,246,769.
2	Gross profit (Form 1065, line 3).....	2	889,053.
3	Ordinary business income (loss) (Form 1065, line 23).....	3	-130,673.
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2).....	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c).....	5	

**Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative**

I declare under penalties of perjury that:

- 1a** If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b** If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative (PR) of the named partnership for the partnership taxable year to which the AAR relates.
- 2** I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
- 3** I am fully authorized to sign the return or AAR on behalf of the partnership.
- 4** The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
- 5** I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS **(a)** an acknowledgment of receipt or reason for rejection of the transmission and **(b)** the reason for any delay in processing the return or AAR.
- 6** I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

**Partner or Member or PR PIN: check one box only**

- ☒ I authorize SALAC. INC to enter my PIN 68540 as my signature  
ERO firm name Don't enter all zeros  
on the partnership's 2024 electronically filed return of partnership income or AAR.
- ☐ As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2024 electronically filed return of partnership income or AAR.

Partner or Member or PR signature: \_\_\_\_\_

Title: MEMBER

Date: \_\_\_\_\_

**Part III Certification and Authentication****ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN. 11058494517

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature: Arnaud Meirhaeghe

Date: \_\_\_\_\_

**ERO Must Retain This Form — See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So****BAA For Paperwork Reduction Act Notice, see instructions.**Form **8879-PE** (2024)

Form <b>1065</b> Department of the Treasury Internal Revenue Service		<b>U.S. Return of Partnership Income</b> For calendar year <b>2024</b> , or tax year beginning _____, <b>2024</b> , ending _____, <b>20</b> . Go to <b>www.irs.gov/Form1065</b> for instructions and the latest information.		OMB No. 1545-0123 <b>2024</b>	
<b>A</b> Principal business activity <b>RESTAURANT</b>		<b>Type or Print</b>	<b>FRONT KINGS LLC FRONT STREET TAVERN 63 N FRONT STREET KINGSTON, NY 12401</b>		<b>D</b> Employer identification number <b>92-3271390</b>
<b>B</b> Principal product or service <b>PRODUCT</b>					<b>E</b> Date business started <b>3/27/2023</b>
<b>C</b> Business code number <b>722511</b>					<b>F</b> Total assets (see instructions) \$ <b>225,644.</b>
<b>G</b> Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return					
<b>H</b> Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify): _____					
<b>I</b> Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: _____ <b>3</b>					
<b>J</b> Check if Schedules C and M-3 are attached _____ <input type="checkbox"/>					
<b>K</b> Check if partnership: (1) <input type="checkbox"/> Aggregated activities for section 465 at-risk purposes (2) <input type="checkbox"/> Grouped activities for section 469 passive activity purposes					
<b>Caution:</b> Include <b>only</b> trade or business income and expenses on lines 1a through 23 below. See instructions for more information.					
<b>I N C O M E</b>	<b>1 a</b> Gross receipts or sales <b>1,246,769.</b> <b>b</b> Less returns and allowances _____ <b>c</b> Balance			<b>1c</b>	<b>1,246,769.</b>
	<b>2</b> Cost of goods sold (attach Form 1125-A).....			<b>2</b>	<b>357,716.</b>
	<b>3</b> Gross profit. Subtract line 2 from line 1c.....			<b>3</b>	<b>889,053.</b>
	<b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts (attach statement).....			<b>4</b>	
	<b>5</b> Net farm profit (loss) (attach Schedule F (Form 1040)).....			<b>5</b>	
	<b>6</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797).....			<b>6</b>	
	<b>7</b> Other income (loss) (attach statement)..... <b>See Statement 1</b>			<b>7</b>	<b>300.</b>
	<b>8 Total income (loss).</b> Combine lines 3 through 7.....			<b>8</b>	<b>889,353.</b>
<b>S E E  I N S T R U C T I O N S  D E D U C T I O N S  L I M I T A T I O N S</b>	<b>9</b> Salaries and wages (other than to partners) (less employment credits).....			<b>9</b>	<b>408,617.</b>
	<b>10</b> Guaranteed payments to partners.....			<b>10</b>	<b>59,330.</b>
	<b>11</b> Repairs and maintenance.....			<b>11</b>	<b>16,240.</b>
	<b>12</b> Bad debts.....			<b>12</b>	
	<b>13</b> Rent.....			<b>13</b>	<b>113,413.</b>
	<b>14</b> Taxes and licenses.....			<b>14</b>	<b>49,495.</b>
	<b>15</b> Interest (see instructions).....			<b>15</b>	<b>16,561.</b>
	<b>16a</b> Depreciation (if required, attach Form 4562)..... <b>16a</b> <b>68,722.</b>				
	<b>b</b> Less depreciation reported on Form 1125-A and elsewhere on return... <b>16b</b>			<b>16c</b>	<b>68,722.</b>
	<b>17</b> Depletion ( <b>Do not deduct oil and gas depletion.</b> ).....			<b>17</b>	
	<b>18</b> Retirement plans, etc.....			<b>18</b>	
	<b>19</b> Employee benefit programs.....			<b>19</b>	
	<b>20</b> Energy efficient commercial buildings deduction (attach Form 7205).....			<b>20</b>	
	<b>21</b> Other deductions (att stmt)..... <b>See Statement 2</b>			<b>21</b>	<b>287,648.</b>
<b>22 Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 21.....			<b>22</b>	<b>1,020,026.</b>	
<b>T A X  A N D  P A Y M E N T</b>	<b>23 Ordinary business income (loss).</b> Subtract line 22 from line 8.....			<b>23</b>	<b>-130,673.</b>
	<b>24</b> Interest due under the look-back method — completed long-term contracts (attach Form 8697).....			<b>24</b>	
	<b>25</b> Interest due under the look-back method — income forecast method (attach Form 8866).....			<b>25</b>	
	<b>26</b> BBA AAR imputed underpayment (see instructions).....			<b>26</b>	
	<b>27</b> Other taxes (see instructions).....			<b>27</b>	
	<b>28 Total balance due.</b> Add lines 24 through 27.....			<b>28</b>	
	<b>29</b> Elective payment election amount from Form 3800.....			<b>29</b>	
	<b>30</b> Payment (see instructions).....			<b>30</b>	
	<b>31 Amount owed.</b> If the sum of line 29 and line 30 is smaller than line 28, enter amount owed.....			<b>31</b>	
	<b>32 Overpayment.</b> If the sum of line 29 and line 30 is larger than line 28, enter overpayment.....			<b>32</b>	
<b>Sign Here</b>		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.			
		Signature of partner or limited liability company member _____		Date _____	
		May the IRS discuss this return with the preparer shown below? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name		Preparer's signature		Date
	<b>Arnaud Meirhaeghe</b>		<b>Arnaud Meirhaeghe</b>		
	Firm's name <b>SALAC, INC</b>		Firm's EIN <b>383794446</b>		PTIN <b>P00955794</b>
	Firm's address <b>282 HARMONY DR MASSAPEQUA PARK, NY 11762</b>		Phone no. <b>516-795-0212</b>		



**Schedule B Other Information**

<b>1</b> What type of entity is filing this return? Check the applicable box:				<b>Yes</b>	<b>No</b>
<b>a</b> <input type="checkbox"/> Domestic general partnership	<b>b</b> <input type="checkbox"/> Domestic limited partnership				
<b>c</b> <input checked="" type="checkbox"/> Domestic limited liability company	<b>d</b> <input type="checkbox"/> Domestic limited liability partnership				
<b>e</b> <input type="checkbox"/> Foreign partnership	<b>f</b> <input type="checkbox"/> Other: _____				
<b>2</b> At the end of the tax year:					
<b>a</b> Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership .....					X
<b>b</b> Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership .....					X
<b>3</b> At the end of the tax year, did the partnership:					
<b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more, of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. ....					X
(i) Name of corporation		(ii) Employer identification number (if any)	(iii) Country of incorporation	(iv) Percentage owned in voting stock	
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below. ....					X
(i) Name of entity		(ii) Employer identification number (if any)	(iii) Type of entity	(iv) Country of organization	(v) Maximum percentage owned in profit, loss, or capital
<b>4</b> Does the partnership satisfy <b>all four</b> of the following conditions?				<b>Yes</b>	<b>No</b>
<b>a</b> The partnership's total receipts for the tax year were less than \$250,000.					
<b>b</b> The partnership's total assets at the end of the tax year were less than \$1 million.					
<b>c</b> Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
<b>d</b> The partnership is not filing and is not required to file Schedule M-3 .....					X
If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					
<b>5</b> Is this partnership a publicly traded partnership, as defined in section 469(k)(2)? .....					X
<b>6</b> During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? .....					X
<b>7</b> Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? .....					X
<b>8</b> At any time during calendar year 2024, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country. ....					X
<b>9</b> At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions .....					X
<b>10a</b> Is the partnership making, or had it previously made (and not revoked), a section 754 election? If "Yes," enter the effective date of the election. ....					X
See instructions for details regarding section 754 election.					
<b>b</b> For this tax year, did the partnership make an optional basis adjustment under section 743(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$( _____ ) of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions. ....					X



Schedule B	Other Information (continued)	Yes	No
c	For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$(_____ ) of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions. ....		X
d	For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b) adjustments for all partners and/or partnership property made in the tax year \$ _____. The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions. ....		X
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year). .... <input type="checkbox"/>		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property? .....		X
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions. ....		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. ....		X
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. ....		
16a	Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions. ....		X
b	If "Yes," did you or will you file required Form(s) 1099? .....		
17	Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return. ....		
18	Enter the number of partners that are foreign governments under section 892. <u>0</u>		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)? .....		X
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938. ....		X
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? .....		X
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions. .... If "Yes," enter the total amount of the disallowed deductions. .... \$ _____		X
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions. ....		X
24	Does the partnership satisfy one or more of the following? See instructions. .... a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$30 million and the partnership has business interest expense. c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		X
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? .....		X
	If "Yes," enter the amount from Form 8996, line 15. .... \$ _____		
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership. .... Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? .....		X
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: _____ By vote: _____ By value: _____		X
29	Is the partnership required to file Form 7208, Excise Tax on Repurchase of Corporate Stock (see instructions): a Under the applicable foreign corporation rules? .....		X



Schedule B	Other Information (continued)	Yes	No
b	Under the covered surrogate foreign corporation rules? ..... If "Yes," to either (a) or (b), complete Form 7208. See the Instructions for Form 7208.		X
30	At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See instructions. ....		X
31	Reserved for future use .....		
32	Check this box if an election out of subchapter K under section 761 is being made. See instructions ..... <input type="checkbox"/>		
33	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 ..... If "No," complete Designation of Partnership Representative below. -----		X

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR **ALEXANDRE BASTIN**U.S. address  
of PR9431 SW 212TH TERRACE  
GUTTER BAY, FL 33139U.S. phone  
number of PR

(786) 660-8552

If the PR is an entity, name of the designated individual for the PR

U.S. address of  
designated individualU.S. phone  
number of  
designated  
individual

<b>Schedule K Partners' Distributive Share Items</b>		<b>Total amount</b>	
<b>Income (Loss)</b>	<b>1</b> Ordinary business income (loss) (page 1, line 23) .....	<b>1</b>	-130,673.
	<b>2</b> Net rental real estate income (loss) (attach Form 8825) .....	<b>2</b>	
	<b>3a</b> Other gross rental income (loss) .....	<b>3a</b>	
	<b>b</b> Expenses from other rental activities (attach stmt) .....	<b>3b</b>	
	<b>c</b> Other net rental income (loss). Subtract line 3b from line 3a. ....	<b>3c</b>	
	<b>4</b> Guaranteed payments: <b>a</b> Services <b>4a</b> 59,330. <b>b</b> Capital <b>4b</b> .....		
	<b>c</b> Total. Add lines 4a and 4b .....	<b>4c</b>	59,330.
	<b>5</b> Interest income .....	<b>5</b>	1,280.
	<b>6</b> Dividends and dividend equivalents: <b>a</b> Ordinary dividends .....	<b>6a</b>	
	<b>b</b> Qualified dividends <b>6b</b> .....		
	<b>c</b> Dividend equivalents <b>6c</b> .....	<b>6c</b>	
<b>7</b> Royalties .....	<b>7</b>		
<b>8</b> Net short-term capital gain (loss) (attach Schedule D (Form 1065)) .....	<b>8</b>		
<b>9a</b> Net long-term capital gain (loss) (attach Schedule D (Form 1065)) .....	<b>9a</b>		
<b>b</b> Collectibles (28%) gain (loss) .....	<b>9b</b>		
<b>c</b> Unrecaptured section 1250 gain (attach statement) .....	<b>9c</b>		
<b>10</b> Net section 1231 gain (loss) (attach Form 4797) .....	<b>10</b>		
<b>11</b> Other income (loss) (see instructions) Type: .....	<b>11</b>		
<b>Deductions</b>	<b>12</b> Section 179 deduction (attach Form 4562) .....	<b>12</b>	
	<b>13a</b> Cash contributions .....	<b>13a</b>	
	<b>b</b> Noncash contributions .....	<b>13b</b>	
	<b>c</b> Investment interest expense .....	<b>13c</b>	
	<b>d</b> Section 59(e)(2) expenditures: <b>(1)</b> Type: .....	<b>13d(2)</b>	
<b>e</b> Other deductions (see instructions) Type: .....	<b>13e</b>		
<b>Self-Employment</b>	<b>14a</b> Net earnings (loss) from self-employment .....	<b>14a</b>	-71,343.
	<b>b</b> Gross farming or fishing income .....	<b>14b</b>	
	<b>c</b> Gross nonfarm income .....	<b>14c</b>	
<b>Credits</b>	<b>15a</b> Low-income housing credit (section 42(j)(5)) .....	<b>15a</b>	
	<b>b</b> Low-income housing credit (other) .....	<b>15b</b>	
	<b>c</b> Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) .....	<b>15c</b>	
	<b>d</b> Other rental real estate credits (see instructions) Type: .....	<b>15d</b>	
	<b>e</b> Other rental credits (see instructions) Type: .....	<b>15e</b>	
	<b>f</b> Other credits (see instructions) Type: See Statement 3	<b>15f</b>	15,894.
<b>International</b>	<b>16</b> Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>		
<b>Alternative Minimum Tax (AMT) Items</b>	<b>17a</b> Post-1986 depreciation adjustment .....	<b>17a</b>	
	<b>b</b> Adjusted gain or loss .....	<b>17b</b>	
	<b>c</b> Depletion (other than oil and gas) .....	<b>17c</b>	
	<b>d</b> Oil, gas, and geothermal properties — gross income .....	<b>17d</b>	
	<b>e</b> Oil, gas, and geothermal properties — deductions .....	<b>17e</b>	
	<b>f</b> Other AMT items (attach stmt) .....	<b>17f</b>	
<b>Other Information</b>	<b>18a</b> Tax-exempt interest income .....	<b>18a</b>	
	<b>b</b> Other tax-exempt income .....	<b>18b</b>	
	<b>c</b> Nondeductible expenses .....	<b>18c</b>	15,973.
	<b>19a</b> Distributions of cash and marketable securities .....	<b>19a</b>	
	<b>b</b> Distributions of other property .....	<b>19b</b>	
	<b>20a</b> Investment income .....	<b>20a</b>	1,280.
	<b>b</b> Investment expenses .....	<b>20b</b>	
<b>c</b> Other items and amounts (attach stmt) See Statement 4			
<b>21</b> Total foreign taxes paid or accrued .....	<b>21</b>		



**Analysis of Net Income (Loss) per Return**

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13e, and 21.....						1	-70,063.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt organization	(vi) Nominee/Other	
a General partners. . . .							
b Limited partners. . . .		-70,063.					

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		142,327.		60,200.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories		18,939.		21,200.
4	U.S. Government obligations				
5	Tax-exempt securities				
6	Other current assets (attach stmt)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach stmt)				
9a	Buildings and other depreciable assets	211,921.		264,945.	
b	Less accumulated depreciation	63,604.	148,317.	132,326.	132,619.
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)				
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
13	Other assets (attach stmt) See St. 5		11,625.		11,625.
14	Total assets		321,208.		225,644.
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach stmt) See St. 6		8,616.		7,990.
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more		241,525.		215,316.
20	Other liabilities (attach stmt)				
21	Partners' capital accounts		71,067.		2,338.
22	Total liabilities and capital		321,208.		225,644.

**Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return****Note:** The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	-145,366.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest	\$
3	Guaranteed payments (other than health insurance)	59,330.	7	Deductions included on Schedule K, lines 1 through 13e, and 21, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		a	Depreciation	\$
a	Depreciation	\$	8	Add lines 6 and 7	
b	Travel and entertainment	\$ 79.	9	Income (loss) (Analysis of Net Income (Loss) per Return, line 1). Subtract line 8 from line 5	-70,063.
Statement 7	15,894.	15,973.			
5	Add lines 1 through 4	-70,063.			

**Schedule M-2 Analysis of Partners' Capital Accounts**

1	Balance at beginning of year	71,067.	6	Distributions: a Cash	
2	Capital contributed: a Cash	76,637.	b	Property	
	b Property		7	Other decreases (itemize):	
3	Net income (loss) (see instructions)	-70,063.	Statement 8		75,303.
4	Other increases (itemize):		8	Add lines 6 and 7	75,303.
5	Add lines 1 through 4	77,641.	9	Balance at end of year. Subtract line 8 from line 5	2,338.

**Cost of Goods Sold****Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**  
**Go to [www.irs.gov/Form1125A](http://www.irs.gov/Form1125A) for the latest information.**

OMB No. 1545-0123

Name

Employer identification number

FRONT KINGS LLC

92-3271390

<b>1</b>	Inventory at beginning of year .....	<b>1</b>	18,939.
<b>2</b>	Purchases .....	<b>2</b>	359,977.
<b>3</b>	Cost of labor .....	<b>3</b>	
<b>4</b>	Additional section 263A costs (attach schedule) .....	<b>4</b>	
<b>5</b>	Other costs (attach schedule) .....	<b>5</b>	
<b>6</b>	<b>Total.</b> Add lines 1 through 5 .....	<b>6</b>	378,916.
<b>7</b>	Inventory at end of year .....	<b>7</b>	21,200.
<b>8</b>	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2, or the appropriate line of your tax return. See instructions. ....	<b>8</b>	357,716.

**9 a** Check all methods used for valuing closing inventory. See instructions.(i) ☐ Cost(ii) ☐ Lower of cost or market(iii) ☐ Other (specify method used and attach explanation) \_\_\_\_\_

For certain small business taxpayers, alternative methods of accounting for inventories:

(iv) ☐ Non-incidental materials and supplies method(v) ☐ AFS method(vi) ☐ Non-AFS method**b** Check if there was a writedown of subnormal goods. .... ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970). .... ☐**d** (i) If the LIFO inventory method was used for this tax year, enter amount of closing inventory figured under LIFO ..... **9d(i)** \_\_\_\_\_(ii) If the LIFO inventory method was used for this tax year, enter amount of the closing LIFO Reserve. .... **9d(ii)** \_\_\_\_\_**e** If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions. .... ☐ Yes ☐ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation. .... ☐ Yes ☐ No**BAA For Paperwork Reduction Act Notice, see instructions.**Form **1125-A** (Rev. 11-2024)



Schedule K-1  
(Form 1065)

Department of the Treasury  
Internal Revenue Service

2024

For calendar year 2024, or tax year

beginning / / 2024 ending / /

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

**A** Partnership's employer identification number  
92-3271390

**B** Partnership's name, address, city, state, and ZIP code  
FRONT KINGS LLC  
FRONT STREET TAVERN  
63 N FRONT STREET  
KINGSTON, NY 12401

**C** IRS center where partnership filed return: e-file

**D** ☐ Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

**E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
771-62-6237

**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.  
ANTONIO GIACCIO  
751 CALIFORNIA AVE  
MIDDLETOWN, NY 10940

**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member

**H1** ☒ Domestic partner ☐ Foreign partner

**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:  
TIN \_\_\_\_\_ Name \_\_\_\_\_

**I1** What type of entity is this partner? Individual

**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐

**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	44 %	44 %
Loss	44 %	44 %
Capital	44 %	44 %

Check if decrease is due to:  
☐ Sale or ☐ Exchange of partnership interest. See instructions.

**K1** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

**K2** Check this box if item K1 includes liability amounts from lower-tier partnerships. ☐

**K3** Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions. ☐

**L** Partner's Capital Account Analysis

Beginning capital account \$ 31,270.

Capital contributed during the year \$ 26,637.

Current year net income (loss) \$ -17,040.

Other increase (decrease) (attach explanation) \$ -46,920.

See Attached

Withdrawals and distributions \$( )

Ending capital account \$ -6,053.

**M** Did the partner contribute property with a built-in gain (loss)?  
☐ Yes ☒ No If "Yes," attach statement. See instructions.

**N** Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

☐ Final K-1 ☐ Amended K-1

651123

OMB No. 1545-0123

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

<b>1</b> Ordinary business income (loss) -57,496.	<b>14</b> Self-employment earnings (loss) A -17,604.
<b>2</b> Net rental real estate income (loss)	
<b>3</b> Other net rental income (loss)	<b>15</b> Credits N 6,993.
<b>4a</b> Guaranteed payments for services 39,892.	
<b>4b</b> Guaranteed payments for capital	<b>16</b> Schedule K-3 is attached if checked. <input type="checkbox"/>
<b>4c</b> Total guaranteed payments 39,892.	<b>17</b> Alternative minimum tax (AMT) items
<b>5</b> Interest income 564.	
<b>6a</b> Ordinary dividends	
<b>6b</b> Qualified dividends	<b>18</b> Tax-exempt income and nondeductible expenses
<b>6c</b> Dividend equivalents	C 7,028.
<b>7</b> Royalties	
<b>8</b> Net short-term capital gain (loss)	
<b>9a</b> Net long-term capital gain (loss)	<b>19</b> Distributions
<b>9b</b> Collectibles (28%) gain (loss)	
<b>9c</b> Unrecaptured section 1250 gain	<b>20</b> Other information A 564.
<b>10</b> Net section 1231 gain (loss)	AJ* STMT
<b>11</b> Other income (loss)	N* STMT
	Z* STMT
<b>12</b> Section 179 deduction	<b>21</b> Foreign taxes paid or accrued
<b>13</b> Other deductions	

**22** ☐ More than one activity for at-risk purposes\*

**23** ☐ More than one activity for passive activity purposes\*

\*See attached statement for additional information.

For IRS Use Only

**Item L**  
**Partner's Capital Account Analysis**  
**Other Increase (Decrease)****Other Decrease**

Guaranteed Payments (other than health insurance) .....	\$	39,892.
Non-Deductible Expenses.....		7,028.
Total	\$	<u>46,920.</u>

**Box 20**  
**Other Information****\* Descriptive Information**

AJ Aggregate Business Activity Gross Income.....	\$	548,711.
AJ Aggregate Business Activity Total Deductions.....		448,811.

**Box 20, Code N**  
**Business Interest Expense**  
**Included as a Deduction on the Following Line(s)**

Below is deductible business interest expense for inclusion  
in the separate loss class for computing any basis limitation  
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1.....	\$	7,287.
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**Statement A – QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)**

<b>Partnership's name:</b> FRONT KINGS LLC	<b>Partnership's EIN:</b> 92-3271390
<b>Partner's name:</b> ANTONIO GIACCIO	<b>Partner's identifying number:</b> 771-62-6237

<b>Partner's share of:</b>	FRONT KINGS LLC		
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)	-57,496.		
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....	179,792.		
<b>UBIA of qualified property</b> .....	116,576.		
<b>Qualified REIT dividends</b>			

<b>Partner's share of:</b>			
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)			
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....			
<b>UBIA of qualified property</b> .....			

Schedule K-1  
(Form 1065)Department of the Treasury  
Internal Revenue Service

2024

For calendar year 2024, or tax year

beginning / / 2024 ending / /

Partner's Share of Income, Deductions, Credits, etc.  
See separate instructions.

## Part I Information About the Partnership

A	Partnership's employer identification number 92-3271390
B	Partnership's name, address, city, state, and ZIP code FRONT KINGS LLC FRONT STREET TAVERN 63 N FRONT STREET KINGSTON, NY 12401
C	IRS center where partnership filed return: e-file
D	<input type="checkbox"/> Check if this is a publicly traded partnership (PTP)

## Part II Information About the Partner

E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.) 872-88-2670
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions. ALI MARDASSI 375 42ND STREET 5G, NY 11232
G	<input checked="" type="checkbox"/> General partner or LLC member-manager <input type="checkbox"/> Limited partner or other LLC member
H1	<input checked="" type="checkbox"/> Domestic partner <input type="checkbox"/> Foreign partner
H2	<input type="checkbox"/> If the partner is a disregarded entity (DE), enter the partner's: TIN _____ Name _____
I1	What type of entity is this partner? Individual
I2	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here <input type="checkbox"/>
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending Profit 38 % 38 % Loss 38 % 38 % Capital 38 % 38 % Check if decrease is due to: <input type="checkbox"/> Sale or <input type="checkbox"/> Exchange of partnership interest. See instructions.
K1	Partner's share of liabilities: Beginning Ending Nonrecourse \$ \$ Qualified nonrecourse financing \$ \$ Recourse \$ \$
K2	Check this box if item K1 includes liability amounts from lower-tier partnerships. <input type="checkbox"/>
K3	Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions. <input type="checkbox"/>
L	Partner's Capital Account Analysis Beginning capital account \$ 27,005. Capital contributed during the year \$ 33,929. Current year net income (loss) \$ -29,732. Other increase (decrease) (attach explanation) \$ -25,508. See Attached Withdrawals and distributions \$( ) Ending capital account \$ 5,694.
M	Did the partner contribute property with a built-in gain (loss)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach statement. See instructions.
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) Beginning \$ Ending \$

☒ Final K-1☐ Amended K-1651123  
OMB No. 1545-0123

## Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) -49,656.	14	Self-employment earnings (loss) A -30,218.
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits N 6,040.
4a	Guaranteed payments for services 19,438.		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked. <input type="checkbox"/>
4c	Total guaranteed payments 19,438.	17	Alternative minimum tax (AMT) items
5	Interest income 486.		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents	C	6,070.
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	19	Distributions
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information A 486.
10	Net section 1231 gain (loss)	AJ*	STMT
11	Other income (loss)	N*	STMT
		Z*	STMT
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		

For IRS Use Only

\*See attached statement for additional information.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

www.irs.gov/Form1065

Schedule K-1 (Form 1065) 2024

Partner 2

PTPA0312L 08/14/24



**Item L****Partner's Capital Account Analysis  
Other Increase (Decrease)****Other Decrease**

Guaranteed Payments (other than health insurance) .....	\$	19,438.
Non-Deductible Expenses .....		6,070.
Total	\$	<u>25,508.</u>

**Box 20****Other Information****\* Descriptive Information**

AJ Aggregate Business Activity Gross Income .....	\$	473,886.
AJ Aggregate Business Activity Total Deductions .....		387,610.

**Box 20, Code N****Business Interest Expense****Included as a Deduction on the Following Line(s)**

Below is deductible business interest expense for inclusion  
in the separate loss class for computing any basis limitation  
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1 .....	\$	6,293.
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**Statement A – QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)**

<b>Partnership's name:</b> FRONT KINGS LLC	<b>Partnership's EIN:</b> 92-3271390
<b>Partner's name:</b> ALI MARDASSI	<b>Partner's identifying number:</b> 872-88-2670

<b>Partner's share of:</b>	FRONT KINGS LLC		
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)	-49,656.		
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....	155,274.		
<b>UBIA of qualified property</b> .....	100,679.		
<b>Qualified REIT dividends</b>			

<b>Partner's share of:</b>			
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)			
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....			
<b>UBIA of qualified property</b> .....			



Schedule K-1  
(Form 1065)

Department of the Treasury  
Internal Revenue Service

2024

For calendar year 2024, or tax year

beginning / / 2024 ending / /

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number  
92-3271390

B Partnership's name, address, city, state, and ZIP code  
FRONT KINGS LLC  
FRONT STREET TAVERN  
63 N FRONT STREET  
KINGSTON, NY 12401

C IRS center where partnership filed return: e-file

D ☐ Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
770-78-9680

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

ALEXANDRE BASTIN  
9431 SW 212TH TERRACE  
GUTTER BAY, FL 33139

G ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member

H1 ☒ Domestic partner ☐ Foreign partner

H2 ☐ If the partner is a disregarded entity (DE), enter the partner's:  
TIN Name

I1 What type of entity is this partner? Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	18 %	18 %
Loss	18 %	18 %
Capital	18 %	18 %

Check if decrease is due to:

☐ Sale or ☐ Exchange of partnership interest. See instructions.

K1 Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

K2 Check this box if item K1 includes liability amounts from lower-tier partnerships. ☐

K3 Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions. ☐

L Partner's Capital Account Analysis

Beginning capital account	\$ 12,792.
Capital contributed during the year	\$ 16,071.
Current year net income (loss)	\$ -23,291.
Other increase (decrease) (attach explanation)	\$ -2,875.
Withdrawals and distributions	\$ ( )
Ending capital account	\$ 2,697.

M Did the partner contribute property with a built-in gain (loss)?

☐ Yes ☒ No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

☐ Final K-1

☐ Amended K-1

651123  
OMB No. 1545-0123

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) -23,521.	14	Self-employment earnings (loss) A -23,521.
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits N 2,861.
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked. <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income 230.		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents	C	2,875.
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	19	Distributions
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information A 230.
10	Net section 1231 gain (loss)	AJ*	STMT
11	Other income (loss)	N*	STMT
		Z*	STMT
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		

22 ☐ More than one activity for at-risk purposes\*

23 ☐ More than one activity for passive activity purposes\*

\*See attached statement for additional information.

For IRS Use Only

**Item L**  
**Partner's Capital Account Analysis**  
**Other Increase (Decrease)****Other Decrease**

Non-Deductible Expenses.....	\$	2,875.
Total	\$	<u>2,875.</u>

**Box 20**  
**Other Information****\* Descriptive Information**

AJ Aggregate Business Activity Gross Income.....	\$	224,472.
AJ Aggregate Business Activity Total Deductions.....		183,605.

**Box 20, Code N**  
**Business Interest Expense**  
**Included as a Deduction on the Following Line(s)**

Below is deductible business interest expense for inclusion  
in the separate loss class for computing any basis limitation  
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1.....	\$	2,981.
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**Statement A – QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)**

<b>Partnership's name:</b> FRONT KINGS LLC	<b>Partnership's EIN:</b> 92-3271390
<b>Partner's name:</b> ALEXANDRE BASTIN	<b>Partner's identifying number:</b> 770-78-9680

<b>Partner's share of:</b>	FRONT KINGS LLC			
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)	-23,521.		
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....	73,551.		
<b>UBIA of qualified property</b> .....	47,690.		
<b>Qualified REIT dividends</b>			

<b>Partner's share of:</b>			
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
Ordinary business income (loss)			
Rental income (loss) .....			
Royalty income (loss) .....			
Section 1231 gain (loss) .....			
Other income (loss) .....			
Section 179 deduction .....			
Other deductions .....			
<b>W-2 wages</b> .....			
<b>UBIA of qualified property</b> .....			

Form 4562

Department of the Treasury  
Internal Revenue ServiceDepreciation and Amortization  
(Including Information on Listed Property)

Attach to your tax return.

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

2024

Attachment  
Sequence No. 179

Name(s) shown on return

FRONT KINGS LLC

Business or activity to which this form relates

Form 1065

## Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions).	1	1,220,000.
2	Total cost of section 179 property placed in service (see instructions).	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions).	3	3,050,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs.	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11.	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12.	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

## Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	31,815.
15	Property subject to section 168(f)(1) election.	15	
16	Other depreciation (including ACRS).	16	

## Part III MACRS Depreciation (Don't include listed property. See instructions.)

## Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024.	17	35,619.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. <input type="checkbox"/>		

## Section B — Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property.						
b 5-year property.		8,713.	5	HY	S/L	872.
c 7-year property.						
d 10-year property.						
e 15-year property.		12,496.	15	HY	S/L	416.
f 20-year property.						
g 25-year property.			25 yrs		S/L	
h Residential rental property.			27.5 yrs	MM	S/L	
i Nonresidential real property.			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

## Section C — Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life.					S/L	
b 12-year.			12 yrs		S/L	
c 30-year.			30 yrs	MM	S/L	
d 40-year.			40 yrs	MM	S/L	

## Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions.	22	68,722.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812L 08/08/24

Form 4562 (2024)



Form **8846**

Department of the Treasury  
Internal Revenue Service

**Credit for Employer Social Security and Medicare Taxes  
Paid on Certain Employee Tips**

Attach to your tax return.  
Go to [www.irs.gov/Form8846](http://www.irs.gov/Form8846) for the latest information.

OMB No. 1545-0123

**2024**

Attachment  
Sequence No. **846**

Name(s) shown on return

FRONT KINGS LLC

Identifying number

92-3271390

**Note:** Claim this credit **only** for employer social security and Medicare taxes paid by a food or beverage employer where tipping is customary for providing food or beverages. See the instructions for line 1.

1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions).....	1	207,767.
2	Tips not subject to the credit provisions (see instructions).....	2	
3	Creditable tips. Subtract line 2 from line 1.....	3	207,767.
4	Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including tips) exceeded \$168,600, see instructions and check here. <input type="checkbox"/>	4	15,894.
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations.....	5	
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 4f.....	6	15,894.

**BAA For Paperwork Reduction Act Notice, see instructions.**

Form **8846** (2024)

FRONT KINGS LLC

92-3271390

**Statement 1**  
**Form 1065, Line 7**  
**Other Income (Loss)**

other income.....	Total	\$	300.
		\$	<u>300.</u>

**Statement 2**  
**Form 1065, Line 21**  
**Other Deductions**

Advertising.....	\$	8,988.
Auto and Truck Expense.....		949.
Bank Charges.....		917.
CARTING.....		5,790.
CONTINUING EDUCATION.....		300.
CREDIT CARDS FEES.....		37,413.
EQUIPMENT RENTALS.....		8,973.
INSPECTION FEES.....		1,385.
Insurance.....		12,453.
Janitorial.....		9,007.
Legal and Professional.....		1,501.
Meals.....		314.
Miscellaneous.....		114.
MUSIC.....		4,281.
Office Expense.....		3,963.
Outside Services.....		107,370.
Parking and Tolls.....		617.
PAYROLL PROCESSING FEE.....		4,620.
PEST CONTROL.....		1,639.
Postage.....		106.
Security.....		1,530.
SMALLWARES.....		93.
Supplies.....		26,209.
Telephone.....		6,568.
TRANSPORTATION.....		1,475.
Travel.....		2,772.
Utilities.....		38,249.
WEBSITE.....		52.
	Total	\$ <u>287,648.</u>

**Statement 3**  
**Form 1065, Schedule K, Line 15f**  
**Other Credits**

Form 8846 - Employer Social Security Credit.....	\$	15,894.
	Total	\$ <u>15,894.</u>



2024

## Federal Statements

Page 2

FRONT KINGS LLC

92-3271390

**Statement 4**  
**Form 1065, Schedule K, Line 20c**  
**Other Reportable Items**

Aggregate Business Activity Gross Income.....	\$	1,247,069.
Aggregate Business Activity Total Deductions.....		1,020,026.

**Business Interest Expense (Informational Only for Basis Limitations)**  
 Included as a Deduction on the Following Lines(s)

Schedule K, line 1.....	16,561.
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**Statement 5**  
**Form 1065, Schedule L, Line 13**  
**Other Assets**

	<u>Beginning</u>	<u>Ending</u>
SECURITY DEPOSIT.....	\$ 11,625.	\$ 11,625.
Total	<u>\$ 11,625.</u>	<u>\$ 11,625.</u>

**Statement 6**  
**Form 1065, Schedule L, Line 17**  
**Other Current Liabilities**

	<u>Beginning</u>	<u>Ending</u>
SALES TAX PAYABLE.....	\$ 8,616.	\$ 7,990.
Total	<u>\$ 8,616.</u>	<u>\$ 7,990.</u>

**Statement 7**  
**Form 1065, Schedule M-1, Line 4**  
**Expenses on Books Not on Schedule K**

Payroll Taxes for Employer SS Tax on Tips Credit.....	\$ 15,894.
Total	<u>\$ 15,894.</u>

**Statement 8**  
**Form 1065, Schedule M-2, Line 7**  
**Other Decreases**

Guaranteed Payments (other than health insurance).....	\$ 59,330.
Non-Deductible Expenses.....	15,973.
Total	<u>\$ 75,303.</u>